



**The City of Lynchburg, Virginia**

Neighborhood Services Division

CITY HALL, LYNCHBURG, VIRGINIA

Phone: (434) 455-3900

Fax: (434) 845-7630

**CERTIFICATE OF ZONING APPROVAL  
FOR HOME-BASED BUSINESS**

PROPOSED USE:

\_\_\_\_\_  
.

Restrictions:

1. I will have no employees on premises.
2. I will not advertise my address.
3. I will not display any signs.
4. No supplies or equipment will be stored on premises.
5. No customers or clients coming to premises.
6. Telephone use only.

Property location:

\_\_\_\_\_

Occupant Name:

\_\_\_\_\_

Telephone Number:

\_\_\_\_\_

Additional restrictions:

\_\_\_\_\_

**This Zoning Approval shall not be construed as authority to violate, cancel or set aside any other applicable Codes or Ordinances in the City of Lynchburg.**

**This Approval shall not be construed as a Business License as required by the City of Lynchburg Commissioner of the Revenue.**

**This Approval may be revoked if any of the Cities Zoning Ordinance or City Code Ordinances are violated in addition to any of the conditions listed above.**

I agree to adhere to the restrictions listed in this Zoning Approval.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Zoning Official: \_\_\_\_\_ Date: \_\_\_\_\_

**\*This letter shall not supersede any final building inspections required for occupancy**